## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

2418-44 1550/

| (Column 1) (Column 2)  |                                  |   |              |                                  |                                     |                  |   | SMALL ENTITY TYPE   |                        |       | OTHER THAN OR SMALL ENTITY              |                        |
|--|----------------------------------|---|--------------|----------------------------------|-------------------------------------|------------------|---|---------------------|------------------------|-------|---|------------------------|
| TOTAL CLAIMS   |                                  |   | 29           |                                  | 100.0                               |                  | ſ | RATE                | FEE                    | <br>آ | RATE                                    | FEE                    |
| FOR  |                                  |   | NUMBER FILED |                                  | NUMBE                               | R EXTRA          | İ | BASIC FEE           | 370.00                 | OR    | BASIC FEE                               | 740.00                 |
| TOTAL CHARGEABLE CLAIMS  |                                  |   | 29 minus 20= |                                  | . 9                                 |                  | ı | X\$ 9=              |                        | OR    | X\$18=                                  | 162                    |
| INDEPENDENT CLAIMS   |                                  |   | 7) mii       | nus 3 =                          | * 4                                 |                  |   | X42=                |                        | OR    | X84=                                    | 336                    |
| МU   | LTIPLE DEPEN                     | DENT CLAIM PI                               | RESENT       |                                  |                                     |                  | Ì | +140=               |                        | OR    | +280=                                   | 7,0                    |
| * If   | the difference                   | in column 1 is                              | less than ze | than zero, enter "0" in column 2 |                                     |                  | l | TOTAL               |                        | OR    | TOTAL                                   | /X                     |
| CLAIMS AS AMENDED - PART II  |                                  |   |              |                                  |                                     |                  |   |                     |                        |       | OTHER                                   | THAN                   |
| (Column 1) (Colum  |                                  |   |              |                                  |                                     | (Column 3)       |   | SMALL               |                        | OR    | SMALL                                   |                        |
| AMENDMENT A  |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | NUM<br>PREV                      | HEST<br>MBER<br>IOUSLY<br>D FOR     | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total                            | *   | Minus        | **                               |                                     | =                |   | X\$ 9=              |                        | OR    | X\$18=                                  |                        |
|  | Independent                      | *   | Minus        | ***                              |                                     | =                |   | X42=                |                        | OR    | X84=                                    |                        |
| L  | FIRST PRESE                      | NTATION OF M                                | ULTIPLE DEI  | PENDEN                           | II CLAIM                            |                  |   | +140=               |                        | OR    | +280=                                   |                        |
|  |                                  |   |              |                                  |                                     |                  |   | TOTAL<br>ADDIT. FEE |                        | OR    | TOTAL<br>ADDIT. FEE                     |                        |
|  | (Column 1) (Column 2) (Column 3) |   |              |                                  |                                     |                  |   | ADDII. FEE          |                        | 4     | ,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,, |                        |
| AMENDMENT B  |                                  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT   |              | NUI<br>PREV                      | HEST<br>MBER<br>NOUSLY<br>D FOR     | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total                            | *   | Minus        | **                               |                                     | =                |   | X\$ 9=              |                        | OR    | X\$18=                                  |                        |
|  | Independent                      | *   | Minus        | ***                              |                                     | =                |   | X42=                |                        | OR    | X84=                                    |                        |
|  | FIRST PRESE                      | NTATION OF M                                | IULTIPLE DE  | PENDEN                           | NT CLAIM                            |                  | J | +140=               |                        | OR    | +280=                                   |                        |
|  |                                  |   |              |                                  |                                     |                  |   | TOTAL<br>ADDIT. FEE |                        | 1     | TOTAL<br>ADDIT. FEE                     |                        |
|  | (Column 1) (Column 2) (Column 3) |   |              |                                  |                                     |                  |   |                     | <u></u>                | _     | ADDII. FEE                              | <u> </u>               |
| AMENDMENT C  |                                  | (Column 1) CLAIMS REMAINING AFTER AMENDMENT |              | HIC<br>NU<br>PRE                 | GHEST<br>IMBER<br>VIOUSLY<br>ID FOR | PRESENT<br>EXTRA |   | RATE                | ADDI-<br>TIONAL<br>FEE |       | RATE                                    | ADDI-<br>TIONAL<br>FEE |
|  | Total                            | *   | Minus        | **                               |                                     | =                |   | X\$ 9=              |                        | OR    | X\$18=                                  |                        |
| ME   | Independent                      | *   | Minus        | ***                              |                                     | ]=               |   | X42=                |                        | OR    | X84=                                    |                        |
|  | FIRST PRESE                      | ENTATION OF N                               | MULTIPLE DE  | PENDE                            | NT CLAIM                            | 1                | J | +140=               |                        | OR    |   |                        |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1. |                                  |   |              |                                  |                                     |                  |   |                     |                        |       |   |                        |